

EIPRP Meeting Minutes

Date of Meeting: 5/24/07

Type of Meeting: Standing Committee

Facilitator: Tom Simpatico, MD

Note Taker: Adriana Cheever

Attendees: Tom Simpatico, MD, Medical Director; Michael Sabourin; Anne Jerman, Nursing Administrator; Brenda Wetmore, Nursing Coordinator, BI; Kate Plummer, Nursing Coordinator, BI-Specialist; Jane Winterling, Vermont Psychiatric Survivors;

Agenda Topics: No Case conference at this meeting-many staff is at convention.
Updated debriefing tools.
Intention to move forward with sensory modulation rooms.
Treatment review panel status.

Discussed: We are setting up a more standardized way of exchanging information with staff and treatment team members regarding clients and any incidents of involuntary procedures, involuntary medication or any other relevant issues that have occurred with each client on a daily basis. The information gathered will be shared with doctor's and treatment team members. This information will then be reviewed to see if any changes are recommended and apply these changes to the client's treatment plan.

This exchange of information will happen in the morning meetings. Notes will also be written in the client's chart with any treatment changes that have been happening along with any incidents of PRN's, seclusions and restraints.

Kate Plummer- Stated that this will help show the tracking of information.

Tom Simpatico- Stated that treatment plan are the main piece of information to show how we are treating a particular individual and that with this exchange of information we will be able to add to the treatment of the client.

Brenda Wetmore- Stated we currently discuss with the clients how incidents may have happened and we can prevent these incidents in the future.

Discussed: Modification of Debriefing Form

Anne Jerman- Introduced the form and reviewed with group. She stated that we have created a standardized form which will be a staff debriefing tool put together to gather data and use this to make improvements either by unit or hospital wide.

Tom Simpatico- Would like to see the information gathered used in this group to make improvements to client care.

Ann Jerman- Stated that this debriefing will happen when the incident happens and that all treatment members involved in the incident will be part of this debriefing. She explained this will help reduce seclusion and restraints before the incident happens.

Examples of what is contained in the form are:

- Did we have enough people to cover the incident?
- Did anyone get injured?
- Making sure MD and RN were present at the beginning of the incident.

Mike Sabourin- Would like to have added to form a more detail to the question –Was this handled appropriately.

Jane Winterling- Would like to have people think of options before the incidents happen. Referred to #14. Would like to not have it be an afterthought of what could be prevented.

Anne Jerman- Thought staff needed to talk about the hard part first (the incident), then discuss what could have been done to prevent this. Felt that logically thinking, if the incident didn't happen, then there would not be a need for a debriefing.

Jane Winterling- Would like to collect information on what steps were taken to prevent these incidents and to use this information for the future.

Anne Jerman- Felt this would be difficult to collect this information.

Jane Winterling- Felt this would be useful in showing the positives that the staff were doing here at the hospital, and could use this information to share with others and it would be useful after all the negative publicity the hospital had received.

Fran Levine- Stated that we don't have a tracking system for this but progress notes in the client's chart show the efforts made of the staff to prevent these incident.

Tom Simpatico-Felt that information collected from positive work done here would be useful not just for us but for others.

Brenda Wetmore-Felt it would be very difficult to track such information-that you would have to apply positive tracking to every incident to identify and track every bit of information for every client would be difficult.

Tom Simpatico-Suggested maybe some kind of receptacle box for staff to put what they may have done to prevent an incident from happening. He stated that it could be very easy to do and not take a long time for staff to do and that it would be complimentary to the debriefing.

Mike Sabourin- Suggested that it could be as easy as saying whether an action was good or bad.

Kate Plummer-Suggested that we could look into the MARS and see how many times PRN medications were given and maybe counting the number of times outs an individual has had.

Jane Winterling-Suggested possibly using flags to mark what happened during these positive events.

Fran Levine-Felt that a lot of these positive events happened all the time and therefore, it would be hard to keep track of this information.

Kate Plummer-Felt that counting the PRN's and time outs would help gather this information.

Tom Simpatico-Suggested getting a card for staff to fill out and write down what they did to prevent an incident and drop the card off in a receptacle box.

Kate Plummer-Felt that we could do this in NAPPI training to show staff how to do this.

Jane Winterling-If there is a flag then it shows that staff they are doing well. This could be used in debriefing to weigh positive and negative.

Kate Plummer-Discussed debriefing form-would like to see it stay the same.

Michael Sabourin-Would like to see these forms when they are filled out.

Conclusion: For the group agreed to put of doing anything with tracking positive feedback-will continue to brainstorm with ideas in next meeting as how to track this positive information.

Discussed: Sensory Rooms

Tom Simpatico-Stated that one of things that could be done to provide these rooms for clients would be to decrease the cap of the census here at VSH by three therefore providing the space we will need for these rooms.

Michael Sabourin-Asked if we are licensed for 54 does that mean it will affect our funding.

Tom Simpatico-Stated that we would reallocate funds to help with these rooms. We would also have to depend on other facilities to handle people we couldn't take. He also stated that outside hospitals struggle with clients who are not taking medication and if therefore may seem as they are not providing treatment therefore these facilities will not get paid.

Michael Sabourin-Asked how this would work.

Tom Simpatico-Stated we would really have to coordinate this because it would cause a ripple effect with outside hospitals as they have a hard time taking acute patients. It will also help with the project to utilize Second Spring. Stated Second Spring is for people who are not ready to use outside conventional tools.

Jane Winterling-Was concerned that Second Spring was set up to fail.

Michael Sabourin-Stated that he felt that this wasn't so.

Tom Simpatico-Stated that he felt Second Spring would be given every opportunity to be able to succeed.

Jane Winterling-Felt that the use of this complex is really misused compared to what it used be, now she feels that most of the space here at the complex (the whole complex) is offices and that it doesn't seem fair.

Tom Simpatico-Felt this issue of sensory rooms is definitely on the front burner and we will be aiming to establish these rooms.

Discussed: Treatment Review Panel

Tom Simpatico-Stated as it stands now, there is three people on this panel and there should be five. Stated it has been difficult to recruiting people but not due to VSH. He is thinking about starting a rotation to be on this panel.

Kate Plummer-Asked if they have had a meeting.

Tom Simpatico-Stated he would like to lessen the political agenda and have a more open dialogue. He would also like to have a real conversation about what is happening. He stated that he has been looking into bringing more people to make the meeting more viable.

Discussed: VPNA-Dolby Miller Disagreement

Tom Simpatico-Documentation failures-they have stopped coming to the meeting. Would like to have them come back to the meeting.

Michael Sabourin-Stated it reflects negatively, but it may have nothing to do with us.

Tom Simpatico-Everyone is interested in good outcomes-staff has been "beaten up in the press." Would like to see VPNA to join together with VSH to have discussion to work together. Felt there was a misrepresentation of the email the was sent around about the grant that we were applying for. Felt we needed to work together.

Michael Sabourin-Felt that some people felt they are not being heard.

Tom Simpatico-Felt this was a useful conversation. Felt the public forum was being negative-didn't feel we were shown in a fair light-it wasn't supportive of the work we are trying to do here.

Brenda Wetmore-Stated that it is clear that there has been commitment to make a better future for the hospital-and we need to set our personal feelings aside to achieve this.

Tom Simpatico-Informed everyone that the Future's Committee has been disbanded.

Michael Sabourin-Stated that it has taken so long for these changes to happen and there are more changes that need to happen.

Tom Simpatico-Asked the group if he could write a letter on the behalf of this group and invite more people to come to this meeting such as the Legislature and more members of VPNA. Tom would like to have all group members name on this letter.

Jane Winterling-Also suggested inviting CRT Directors-or representatives to come to these meetings. Also other representatives from other hospitals.

Kate Plummer-Asked if this was an appropriate meeting for us to invite them to.

Tom Simpatico-Felt that it made a lot of sense to invite them to this meeting.

Francine Levine-Suggested also asking people from Corrections.

Jane Winterling-Suggested someone from the court system and Department of Mental Health.

Tom Simpatico-Agreed, stated he would like to talk about all aspects of seclusion and restraints, involuntary medications and include a broader discussion to benefit everyone invited to this group.

Tom Simpatico-Asked if the group members were interested in renaming this group. Stated he would send out letter with possible name changes.